

LOOK WHAT'S INSIDE

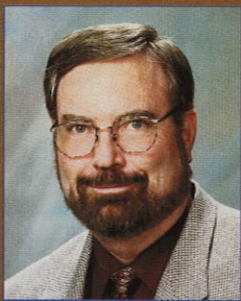
CHILDHOOD DEPRESSION

POSITIVE DISCIPLINE

LAST LAUGH

NCF IN ACTION

NCF  
 VIEWPOINT



Bruce Narramore, Ph.D.

Here is your first compact issue of *Psychology for Living!* The lead article by Dr. Andy Johnson offers a biblically and psychologically sensitive understanding of depression, perhaps the most common of all emotional problems. Dr. Johnson also answers the questions: "Can children be depressed?" and "How is Postpartum Depression different from the 'Baby Blues'?"

In NCF in Action, you will read a report on the first-of-its-kind, overseas counseling seminar for missionaries and pastors in Southeast Asia. Many of you helped make this seminar possible and I think you will be thrilled with the impact it had on the lives of many missionaries and international pastors.

I hope this new format will continue to be a blessing to you, your family, and your friends. By publishing this compact issues three times each year and our full-sized issue in the Fall we will be able to invest more of our resources into direct ministries like our Thailand counseling seminar and our MK re-entry programs. †

## Understanding and Overcoming Depression

By Andy J. Johnson

**T**onya is a thirty-two-year-old lawyer who feels depressed and pessimistic and has very low self-esteem. She cannot remember a time in many years when she has not felt depressed. She is unhappy with her family, her job, and her entire life. It is as though a black cloud of gloom covers her entire world. Tonya is suffering from a form of depression known as Dysthymia.

Everyone feels sad or down at times. But depression is different from ordinary sadness. Ordinary sadness is temporary and a normal part of life. Depression is much worse, lasts longer, and involves terrible feelings toward one's self. Depression can interfere with the person's ability to function on the job, at home, in social situations, or in other important roles while normal sadness does not.

Someone with Major Depression will have at least five of the following symptoms most of the time every day for at least two weeks:

- A depressed, irritable, or cranky mood most of the time nearly every day
- Greatly reduced interest or pleasure in



- daily activities
- Changes in appetite that result in a significant weight loss or gain
- Sleep disturbance (difficulty sleeping or excessive sleeping)
- Agitation or slowing down
- Fatigue or loss of energy
- Feelings of worthlessness or guilt
- Decreased ability to concentrate or make

- decisions
- Recurrent thoughts about death or suicide

### How Depression Develops

Depression can have physical, spiritual, and/or emotional causes.

*Some people appear to have a higher genetic predisposition to becoming depressed. They are more likely to become depressed after even relatively minor losses or*



# Lending to the Lord

By Ruth E. Narramore

For many years my godly grandfather, Dr. John Nelson Roe, had a medical practice in Brooklyn, New York. He was well loved by the people of that city, and little wonder: he never pressed his patients to pay.

A sizeable portion of his clientele were from the poorer parts of town. Grandfather's fees were not very high – especially for those he thought to be hard pressed financially. But even at that, many of his patients never got around to paying him for medical services. There were those, of course, who took unjust advantage of his leniency, but that did not alter his policy for payments.

“

He who is kind to the poor lends to the Lord.”

Yet, Dr. Roe was not the loser. Whenever he came across the delinquent account of a patient, he merely took his pen and wrote in the margin beside the name of the debtor, Proverbs 19:17 (NIV) “He who is kind to the poor lends to the Lord, and he will reward him for what he has done.” As far as grandfather was concerned, the account no longer involved his patient. From then on, it was a transaction between himself and the Lord.

Grandfather knew that he had not lost a thing. Rather, he was entering into an investment which offered far greater security and much higher dividends than any business deal this world could ever hope for. Furthermore, the interest from such an investment would go on throughout eternity. He would be rewarded by God. This was the promise of God's Word.

God is never a debtor. When we give to those in need – even if only a cup of cold water – we are lending “unto the Lord” and will be repaid by Him “a hundredfold”. †

stresses. Others have glandular problems (such as a thyroid disorder) which causes the depression or intensifies it.

*Childhood losses and emotionally traumatic events can make us vulnerable to depression if we encounter a similar event or loss later in life.* Robert's mother died when he was six years old. Her death was so painful for Robert and his father that they never talked about it. They tried to push their feelings deep inside or distract themselves by getting lost in work or school. This left Robert vulnerable to feeling abandoned or left alone. When his college girlfriend suddenly broke off their relationship Robert's, unresolved feelings of grief, hurt, and abandonment welled up and left him feeling depressed. When an adult experience of rejection or failure stirs up buried childhood feelings like Robert's, the person isn't just dealing with the adult or present pain. His or her childhood feelings of depression, abandonment, and fear are triggered as well.

*Unresolved grief is another common cause of depression.* Since Robert's father was too upset to talk with Robert and share their sadness over losing their mother and wife, Robert never resolved his grief. Instead, he was left with a lingering expectation that those he loved and needed would ultimately abandon him. The depression he felt was the delayed depression of a sad boy who had lost his mother.

*Repressed anger usually plays a role in depression.* In fact, depression can be

understood as a melding together of sadness over losses and unresolved anger in such a way that neither emotion can be

individuals often are either not aware of how they beat themselves up with their thoughts or they assume that this just

“

Childhood losses and emotionally traumatic events can make us vulnerable to depression if we encounter a similar event or loss later in life.”

fully experienced and resolved until they are adequately identified and dealt with.

*Others are susceptible to depression because they have never learned to soothe themselves or make themselves feel better when they face failures or difficult times.* When Robert's mother was alive, for example, she talked with him and helped him feel better when he was troubled about something. But she died before Robert had developed the ability to soothe himself and make himself feel better on his own.

*Some people become depressed because they lack social support or don't know how to engage socially with others when they are in a time of transition, crisis, or stress.*

Finally, unrealistic negative thoughts about oneself, the world, and the future are found in most people with clinical depression. These automatic, knee-jerk reactions can develop in childhood, or slowly over time in adulthood. Depressed

reflects the way things really are.

## Depression and Spiritual Commitment

Does depression mean that a person has a spiritual problem? No more than we all do. Charles Spurgeon, Martin Luther, and many other godly men and women have struggled with depression. While all human problems can be traced back to the Fall of Adam and Eve in the Garden of Eden, and in that sense are caused by sin, depression is rarely due simply to one's personal sins. Individuals only complicate their symptoms when they allow themselves to feel guilty for their depression. Some people who intentionally sin on a frequent basis have no depression. And some wonderful people feel quite depressed. There is rarely a direct causal relationship between conscious personal sin and depression.

## Treatment

Fortunately, we don't have to live with debilitat-



## Can Children be Depressed?

By Andy J. Johnson

Yes, they can. At one time, it was thought that children could not develop depression because childhood is such a happy time. It turns out, however, that children can become severely depressed, but their depression is often hidden under behavior problems such as throwing things or aggressiveness towards others, or just being cranky most of the time. Sometimes their depression is misunderstood as a conduct disorder or Attention Deficit-Hyperactivity Disorder.

Other children with depression are extremely well-behaved, quiet, and compliant at home and school. Some withdraw and stay by themselves whenever they can, so they can cry and feel the sadness they try to hide from others. Parents and teachers are often shocked or surprised when they find out these children are depressed. If your child is almost always quiet, prefers to withdraw from others, or be alone most of the time, or frequently looks teary eyed, you might talk with him or her to see if he or she is depressed. †

ing.

Depression can be effectively treated. If you or a loved one is suffering from depression, don't hesitate to seek out a well-qualified professional counselor to help you gain relief and resolve the underlying problems. God wants you to have an enjoyable meaning-filled life. Don't let depression rob you of it! †

• <sup>1</sup>Adapted from American Psychiatric Association (2000). *Diagnostic and Statistical Manual of Mental Disorders* (4<sup>th</sup> edition). Washington D.C.

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• This article is a shortened version of Dr. Johnson's new booklet, "Understanding and Overcoming Depression". If you would like a copy of the entire booklet, write us at P.O. Box 661900, Arcadia, CA 91066-1900

ing depression. There are a number of effective treatments. Medication should always be considered in cases of severe depression. If the problem is biologically caused, medication may be the only treatment needed. More often, good counseling or psychotherapy may be combined with medication.

If you or a loved one goes for counseling for depression, you should expect your therapist to be a sensitive listener with whom you can feel safe from judgment, criticism, anger, and pessimism. Above all else, depressed people need to feel safe and accepted just as they are. This acceptance is the opposite of the internal self-hatred that is at the root of depression.

Once counseling begins, you should expect to gradually explore the sources of your depressed feelings. This includes unresolved

grief, recurring patterns in relationships where your needs are not being met, harmful self-talk, or experiences that have undercut your self-esteem. You may learn to identify automatic, negative thoughts that make your depression worse.

At some point you will probably face some painful experiences and some hurt and anger over those experiences. As counseling continues you will begin to understand how your depression works, what causes it, and how you can break the cycle of self-hatred and self-condemning thoughts.

As a Christian, you may also come to accept God's love and forgiveness in a much deeper way and find new hope and support in your relationships with God. Scriptural passages on God's love and forgiveness and His complete acceptance of you will take on a wonderful new mean-

life of her family.

Postpartum Depression is more severe. Sometimes it involves an inability to feel any happiness or joy about the arrival of the baby at all. Sometimes it includes suicidal ideation or obsessive thoughts about violence to the baby. It is even possible in severe cases for someone with Postpartum Depression to lose touch with reality.

It is important to talk with a doctor or a psychotherapist



if you or your loved one is concerned about the possibility of Postpartum Depression. Support from others, especially the father of the child, and counseling can be helpful. Severe cases and situations where someone has lost contact with reality (e.g., they have delusional beliefs that are obviously not true, etc.) will require antidepressant medication and possibly a brief period of hospitalization. †

## POSTPARTUM DEPRESSION

### How is Postpartum Depression Different From the "Baby Blues?"

By Andy J. Johnson

It is not unusual for mothers to experience sudden swings or changes in mood, including periods of both happiness and sadness, in the first several days after having a baby. This is normal. It can be due to extreme fluctuations in hormone levels, the sheer physical exhaustion associated with the birthing process, and all of the changes in her life and the



# Serving God's Servants in Southeast Asia



**Dr. and Mrs. Bruce Narramore share with Dr. and Mrs. Junias Venugopal during a break in counseling seminar.**

By Bruce Narramore

**T**he moment Kathy and I stepped into the lobby of the Chiang Mai Sports Inn, we felt like saying, "Praise the Lord!"

We knew we had chosen a perfect spot to host the 32 missionaries who would soon be arriving for two weeks of intensive training and personal growth in missionary member care and counseling. The Sports Inn sits in a lovely forested area on the outskirts of Chiang Mai in the North Central region of Thailand. The casual open-air lobby overlooks lush tropical gardens, a manicured lawn dotted with palm trees, and the largest swimming pool I have ever seen.

The physical surroundings would be important because many of these missionaries were stressed out from overwork and living in incredibly difficult, barren, or dangerous circumstances. They needed a relaxing, nurturing place to stay while they took the intensive training and counseling the seminar would provide. And incredibly, the

cost for 12 nights and 13 days for room and all meals was only \$300 per person—about the cost of two or three nights of room and meals in a reasonably priced hotel here in the United States!

Soon the missionaries began arriving. They came from all across Thailand as well as India, Indonesia, Ethiopia, the Philippines, Kenya and the United States. I had assumed that most of the missionaries were initially from the United States. And many were. But they also came from Norway, Sweden, Germany, New Zealand, India and Thailand. What a wonderful, diverse group of godly men and women. A few were single. Most were married. Some of these leaders had been counseling and supporting other missionaries in their mission agencies for many years. Others were just beginning their ministries of caring for their fellow missionaries.

By the time the missionaries all arrived, our staff of six Christian psychologists was in place. We had flown in two days earlier to have time to

Bruce and Kathy Narramore recently led a team of six Christian psychologists to Chiang Mai, Thailand, to offer an intensive two-week seminar in counseling and member care for missionary leaders. This first-hand report describes some of the stresses missionaries face and the impact of this first-of-its-kind overseas counseling seminar.



**Missionaries and pastors attending Southeast Asia counseling seminar.**





**Dr. Dave Wickstrom teaching on stress management.**



**Participants relaxing between sessions.**

recover from jet lag before the seminar began on Monday morning. Once this intense seminar began, we were grateful that we'd had that couple of days of rest. Almost from the moment the missionaries arrived, they started seeking us out for individual or couples counseling and consultation. They not only sought insights and methods for helping others; they wanted help for themselves.

One participant approached one of our staff psychologists the first day say-

ing, "I am struggling with some issues in my ministry and my personal life and I need help sorting them out. I don't want to waste any time so I would like to have a counseling session every day." Our counselor immediately arranged those sessions and the missionary told me later how incredibly helpful her counseling had been. "This two weeks has been both an island in a sea of confusion and a coming home," she said, "Thank you."

"What," you may be wondering,

"was the schedule like? And what topics did you cover?" Our schedule began with worship at 8:30 each morning. From 9:00 AM until 12:15 we had lectures and presentations on counseling techniques, stress, grief, adjustment difficulties of missionary children, depression, guilt, interpersonal conflicts on a missionary team, managing anger and other very practical topics.

After lunch we had another general session. Then the participants divided into one of three elective workshops where they would meet daily with a small group of other participants for one and a half-hours during the next ten days. They choose from (1) a couples growth and counseling workshop, (2) a basic counseling and listening skills workshop, or (3) a personal growth and counseling group. The first day, nearly all of the participants took an individual personality test, then met with one of our counselors to go over the results. This helped them take a look at some of their own personality strengths and weaknesses and to identify their growing edges.

The missionaries represented a variety of responsibilities and needs. As leaders, they all have positions involving caring for and supporting other missionaries. One couple, for example, is responsible for the care and support of 150 missionary families throughout Southeast Asia. Another serves missionaries from East Africa. Still another is responsible for all of the field orientation and equipping of new missionaries during their first 12 months on the field in Indonesia.

But their desire to deepen their counseling skills was only one reason they came. They also arrived looking for a place to unburden their own struggles and stresses. So between the daylong seminar sessions, our counselors spent innumerable hours counseling one on one and couple on couple about these difficult experiences and challenges. They also shared their blessings and struggles with other missionaries over meals and at break times and in the evenings.

Some were incredibly burned out after years of giving and giving while

**CONTINUED ON THE NEXT PAGE**



# The Paper Trail

By Betty L. Whitworth

Every afternoon I found large paper wads in the back corner of the classroom, but I could never catch the perpetrator. The mystery began after a series of lessons on respecting the environment. One lesson focused on the environment of the classroom and how each person was responsible for maintaining a pleasant atmosphere. One student named Johnny took offense, stating the janitor was responsible for the room being neat and clean.

I suspected that student of leaving the paper trail, but I did not want to accuse him without evidence, and even then confronting him could prove unwise. Johnny was a lonely boy with a history of hostility toward teachers.

Twelve-year-old Johnny touched a special place in my heart. I knew his home life was not good; his family was struggling just to put food on the table. Many times parents under these conditions devote all their

energy to surviving. Giving proper attention to their children was not a priority. I suspected that many of Johnny's misbehaviors over the years were an attempt to get attention. He had decided that negative attention was better than no attention. I wanted to help Johnny change that attitude.

Days went by and I continued to discard the paper wads. That wasn't a serious problem, but left unattended it could snowball, so it needed to be resolved. The best resolution

would include Johnny's input. One day he gave me the tool I needed.

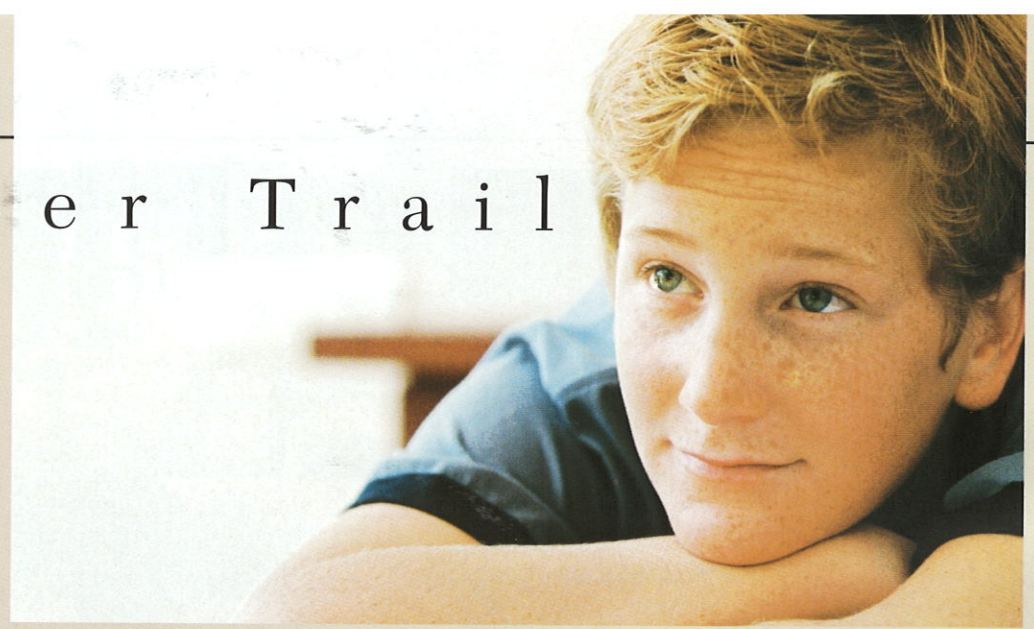
"Mrs. Whitworth, do you like mysteries?" he asked.

"I sure do!"

"Me too," he replied, a twinkle in his eye.

At the afternoon break I called Johnny aside. "You and I both like mysteries, so I wondered if we might work together to solve one."

His eyes widened. "Yeah! What is it?"



## CONTINUED FROM PREVIOUS PAGE

receiving practically no support and care in return. Others had marriage and family struggles much like we would have here, except they were also dealing with physical danger, harsh living conditions and very little emotional and spiritual support. At least two were struggling with severe depression. Others sought counseling after they began their elective workshops in listening skills or working with couples. As they learned to work with others they realized there were unresolved areas in

their own marriages and relationships that could be helped and enriched. So they had individual or couples counseling sessions to go deeper into those conflicted or needy areas.

### Small group discussion.

For many of the participants, it was an absolutely life-changing experience. I think the best way for you to sense the impact is to hear from the attendees themselves. Here is what a few of them had to say:

- I am leaving feeling more whole than I have in my entire life.

- I have a renewed sense of the Grace of God in my life.
- I got in touch with some personal pain which has been zapping my ability to tolerate the stress of my ministry.
- I came to learn to help others, but found out that it was a growing experience for myself.
- The couples workshop enabled me talk about painful previously unspoken things with my spouse.
- It was just what I needed as a new member care worker. The foundational presentations followed by practical workshops gave us a complete picture.
- I would love to see this seminar in every major mission center in the world

Seeing such life altering changes in the lives of just two or three people would have made the entire seminar worthwhile. But person after person came up to us at the close of the two weeks with similar comments. The seminar was like fresh water on parched soil for many of these wonderful committed men and women of God. And it could not have been possible without the many friends and supporters of the ministries of the Narramore Christian Foundation. We have already been asked to offer similar seminars in India and Africa. I believe this seminar will be the beginning of many more that we will make available to God's servants, not only in Southeast Asia, but around the world. As the scripture encourages us, we want to do good to all people, "especially to those of the household of faith" (Galatians 6:10). Please pray for us as we consider how best to meet this incredible need worldwide!

†





## Twelve Guidelines to Discipline A Child In A Positive Manner

By Betty L. Whitworth

- Approach the problem with a statement of observation – not accusation.
- Allow the child to become part of the solution. Ask his suggestion for a solution. Give it serious consideration. If it is not feasible, explain why.
- Speak kindly. Anger never accomplishes a positive solution. (A soft answer turns away wrath, but grievous words stir up anger. Proverbs 15:1.)
- If discipline is necessary, state the discipline and stick to it. When a child is excused from the promised discipline, he learns that your word is not valid.
- Be consistent in enforcing rules. If a child gets by with breaking a rule once, he will repeatedly try. (It is better not to make a rule if you cannot consistently enforce it.)
- Children desire boundaries. They offer security. Children feel secure knowing if they go outside the set boundaries, someone will pull them back.
- Do not bring up past mistakes once the discipline has been administered. Let the child know you are not keeping score of his misbehaviors.
- Do not try to make the child feel guilty. Instead tell him why his conduct was not acceptable and that you will not tolerate it.
- Never argue with your child when you issue discipline. You are the parent. It is your responsibility to “train up the child in the way he should go.”
- If you make a mistake in your judgment of discipline, apologize.
- Point out acceptable behaviors.
- Avoid pointing out unacceptable behaviors unnecessarily. (Some behaviors need immediate attention.) †

“You sit in the back of the classroom, and that’s where the mystery is happening,” I whispered. “Every afternoon I find a dozen or so large paper wads in the corner. Do you think you could keep your eyes open for who might be doing this? It’s not good for our environment and my bad back. If we could solve this mystery, I sure would appreciate it.”

“I’ll help,” he whispered.

That afternoon I found no paper wads.

The next morning I talked to Johnny privately. “Somebody must know you’re watching,” I whispered. “I found no paper wads yesterday afternoon. Good job.”

His eyes sparkled. “Really! I’m watching, Mrs. Whitworth. Do you think we’ll catch him?”

“I don’t know. If we can just get him to stop doing this, that’s what counts. You know, I bet this person is really not so bad. Maybe he just needs some attention.”

“Maybe. I’ll keep watching.”

The mystery allowed Johnny to receive some positive attention from me every day. We began discussing subjects other than the mystery. And, I never missed an opportunity

to mention his good behavior and tell him how I appreciated his help.

Jesus said, “Suffer the little children to come unto me.” Until this troubled child felt free to “come” to me, his teacher, I could not minister to his emotional needs. Education goes far beyond textbooks. It needs to include skills for everyday living, emotional support, a feeling of belonging to the group, and the growth of self-esteem.

At the end of the school year Johnny’s father came to see me. “I had to meet the person who has gained my son’s respect,” he said. “How did you do it? He sure doesn’t show any respect for me!”

“Respect is a mutual thing,” I replied. “I respect Johnny. He has some good qualities. He just needed someone to help him discover them.” †

Betty L. Whitworth, from Leitchfield, Kentucky is a retired language arts teacher and is now working as a free-lance writer and newspaper columnist. Her articles have appeared in many publications. She can be contacted at [blwhit@bbtel.com](mailto:blwhit@bbtel.com).

### LAST LAUGH

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## Almonds Lower Blood Cholesterol



Almonds can help lower blood cholesterol, according to a new Canadian study. When people with high cholesterol ate about one ounce of almonds a day, they lowered

their LDL ("bad") cholesterol by an average of 4%; 2 ounces, by 9%. At the same time, their HDL ("good") cholesterol rose slightly. Many other studies have found similar effects for various kinds of nuts, which are all rich in cholesterol-lowering fats. The trick is to eat nuts in place of other foods, as these people did. Almonds have 165 calories per ounce, so it would be easy to gain weight if you simply added them to your daily fare.

—UC Berkeley Wellness Letter



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